

APPENDIX

Exhibit 1

Form 1 Initial survey

Health Questionnaire

Name of Prefecture Health Center

District code		Household code		Individual code	
Name		M	Date of birth		
		F	(year	month day)
			1. Single	2. Married	3. Divorced 4. Widowed
Address					
Place of birth	Prefecture	City	Occupation (in detail)		
For women	Number of children	Length of breast feeding after last delivery		Age at first marriage	
		month(s)			

Anamnesis

Eating Habits	Rice/Wheat	Amount/day	Frequency
	Meat	1. Daily 2. Occas 3. Rare 4. None 5. Obscure	
	Fish and shell fish	1. Daily 2. Occas 3. Rare 4. None 5. Obscure	
	Milk and goat milk	1. Daily (amount) 2. Occas 3. Rare 4. None 5. Obscure	
	Green-yellow vegetables	1. Daily 2. Occas 3. Rare 4. None 5. Obscure	
	Pickles	1. Every meal 2. Daily 3. Occas 4. Rare 5. None 6. Obscure	
	Soybean paste soup	1. Daily 2. Occas 3. Rare 4. None 5. Obscure	
	Smoking	1. Smoking daily (a) Cigarette No./day (b) Kizami (c) Others 2. Occas 3. Ex. 4. None 5. Obscure	
	Alcohol	Age started () 1. Daily 2. Occas 3. Rare 4. None 5. Obscure	
		Type (1) Sake (2) Shochu (3) Beer (4) Whisky (5) Others (6) Obscure	
Favorites	Green tea	1. Very hot 2. Moderate 3. None 4. Obscure	

2026124994